



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

January 29, 2015

Tara Ulery
601 E. Main Street
LeGrand, IA. 50142

Dear Child Care Provider,

This letter is in regards to the December 5, 2014 compliance check of your Level B, Registered Child Development Home. Iowa Code Chapter 237A and 441 Iowa Administrative Code, Chapter 110, describes specific requirements that must be met by a Registered Child Development Home. The following areas were out of compliance at the time of my visit:

☐ 110.5(1)a Numbers for police, fire, ambulance, poison information posted by phone.

THIS NEEDS TO BE COMPLETED AND POSTED BY PHONE.

☐ 110.5(1)c First-Aid supplies are available and easily accessible in the home, outdoor play area, any vehicle used to transport children, and on field trips.

☐ 110.5(1)c The first-aid kit is sufficient to address first aid related to minor injury or trauma and stored in an area not accessible to children.

NEED TO ADD TWEEZERS TO THE KIT. A LIST OF RECOMMENDATIONS OR SUGGESTED FIRST AID SUPPLIES WILL BE ATTACHED TO THIS LETTER.

☐ 110.5(1)h Is fenced off when located on a busy thoroughfare or near a hazard.

IS FENCED OFF AT THE HIGHWAY YET NOT ENCLOSED.

☐ 110.5(2)b Two hours of approved child abuse and neglect mandatory reporter training (and every 5 years thereafter.)

NEED DOCUMENTATION OF THIS FOR TARA.

☐ 110.5(2)d An individual file is maintained for each substitute and contains:

YOU INDICATED THAT BLAIR IS YOUR SUBSTITUTE. HOWEVER, IT DOESN'T APPEAR SHE HAS BEEN APPROVED THRU KINDER TRACK AS YOUR SUBSTITUTE. CONTACT CHILD CARE REGISTRATIONS AT 1-866-448-4605 TO COMPLETE THE REQUIRED PAPERWORK.

☐ 110.5(8) An individual file is maintained for each child and updated annually or when there are changes. Each file contains:

THIS IS MISSING FOR TWO CHILDREN'S FILES.

☐ 110.5(8)a Identifying information including, at a minimum, the child's name, birth date, parent's name, address, telephone number, special needs of the child and the parent's work address and telephone number.

THIS IS MISSING FOR TWO.

☐ 110.5(8)b Emergency information including where the parent can be reached, the name, street address, city and telephone of the child's regular doctor, and the name number, telephone number, and relationship to the child of another adult available in case of emergency.

THIS IS MISSING FOR TWO.

☐ 110.5(8)c A signed medical consent from the parent authorizing emergency treatment.

THIS IS MISSING FOR TWO.

☐ 110.5(8)d For infants and preschoolers: An admission physical examination, on the first day of attendance, including past health history, status of present health, allergies and restrictive conditions, and recommendations for continued care when necessary. The date of the exam is not more than 12 months before the child's first day of attendance.

THIS IS MISSING FOR FOUR INFANT/PRESCHOOLER'S.

☐ 110.5(8)d For school-aged children: On the first day of attendance, a statement of health status signed by the parent or legal guardian.

THIS IS MISSING FOR ONE.

☐ 110.5(8)e For infants and preschoolers: A statement of health signed by a physician submitted annually.

THIS IS MISSING FOR ONE.

☐ 110.5(8)e For school aged children: An annual statement of health condition signed by the parent or legal guardian, annually from date of admission physical.

THIS IS NEEDED FOR THREE.

☐ 110.5(8)f A list signed by the parent which names persons authorized to pick up the child, their telephone number, and relationship to the child.

THIS IS NEEDED FOR FIVE.

☐ 110.5(8)g A signed and dated immunization certificate provided by the state department of public health.

THIS IS NEEDED FOR ONE.

☐ 110.5(8)h For each school-age child, record of a physical exam completed at the time of school enrollment or since.

THIS IS NEEDED FOR THREE.

Non-compliance with any of the mandated regulatory requirements listed above may lead to the cancellation or revocation of your Child Development Home Registration. **Please take whatever steps are necessary to completely address each of the violations noted above. It is essential you correct all above-mentioned violations within the next 45 days.**

X ☐ Based on the items out of compliance listed above, you will be required to have a recheck or follow up visit to your home. This visit will occur after the 45 day time period has elapsed.

Please do not hesitate to contact me at DHS at 319-292-2360 if you have any questions regarding this letter.

Sincerely,

Patricia Smart
Social Worker II

Natalie A. Clapp

Natalie Clapp

Social Work Supervisor

Department of Human Services

Always Remember:

Child Care Resource and Referral is an excellent resource for providers to access training options and support in your area. You can reach Child Care Resource and Referral at 641-650-1532.

As you plan your future trainings to meet your 24 hours of training requirement, please remember that you need to use only DHS approved training and only 12 hours can be by self-study. You can access the approved training by going to http://dhs.iowa.gov/sites/default/files/CC_Professional_Development.pdf and you can sign up for training at <http://ccmis.dhs.state.ia.us/trainingregistry/>

All providers need to maintain compliance with rules set out in Iowa Administrative Code, Chapter 110, which includes: 441 IAC 110.5(1): Check with the appropriate authorities to determine how the following local, state, or federal laws apply to you: • Zoning code • Building code • Fire code • Business license • State and federal income tax • Unemployment insurance • Worker's Compensation • Minimum wage and hour requirements • OSHA • Americans with Disabilities Act (ADA).